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7590

03/16/2004

Adams Schwartz & Evans  
2180 Two First Union Center  
Charlotte, NC 28282



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Celeste Foley (Depositor's name)  
Celeste Foley (Signature)  
06-16-04 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/937,787      | 09/28/2001  | Patrick F. Dunne     | 2834/1              | 7062             |

TITLE OF INVENTION: FLUID TREATMENT SYSTEM

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES          | \$665     | \$0             | \$665            | 06/16/2004 |

| EXAMINER          | ART UNIT | CLASS-SUBCLASS |
|-------------------|----------|----------------|
| HURSKOCI, PETER A | 1724     | 210-173000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Adams Evans P.A.  
2.  
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

3C Water Systems Ltd.

Box 406, Lumsden, Saskatchewan, Canada S0G 3C0

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-0265 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
Stephen S. Ashley, Jr. Reg. No. 47,394

(Authorized Signature)

(Date)

Stephen S. Ashley, Jr.

06-16-04

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PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PAGE 3/4 \* RCVD AT 6/16/2004 10:38:49 AM [Eastern Daylight Time] \* SVR:USPTO-EFXXRF-2/0 \* DNIS:7464000 \* CSID:704 375 0729 \* DURATION (mm-ss):01-58



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**FACSIMILE TRANSMISSION**

TO: UNITED STATES PATENT AND TRADEMARK OFFICE  
(Mail Stop: ISSUE FEE) FROM: Stephen S. Ashley, Jr.

DATE: June 16, 2004 FAX NO: (703) 746-4000

RE: Our File No. 2834/1; U.S. Serial No. 09/937,787; Patent Application for "FLUID TREATMENT SYSTEM"; Carson Water Systems, Ltd.; Your File: 380-02-04

|                              |     |    |   |
|------------------------------|-----|----|---|
| CONFIRMATION COPY TO FOLLOW: | YES | NO | ✓ |
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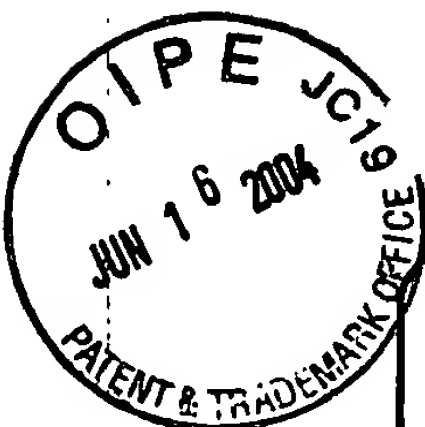
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If any problems in transmission occur, please contact: Celeste Foley, Legal Assistant

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|   |                      |                        |        |
|---|----------------------|------------------------|--------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number   | 09/937,787             |        |
|   | Filing Date          | 09/28/2001             |        |
|   | First Named Inventor | Dunne, Patrick F.      |        |
|   | Art Unit             | 1724                   |        |
|   | Examiner Name        | Hruskoci, Peter A.     |        |
| Total Number of Pages in This Submission  | 4                    | Attorney Docket Number | 2834/1 |

| ENCLOSURES (Check all that apply)  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Facsimile Cover Sheet |
| Remarks<br>Please charge any applicable fees to Deposit Account No. 01-0265.   |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT   |  |  |
| Firm or Individual name  | Stephen S. Ashley, Jr. Reg. No. 47,394   |  |
| Signature  | <i>Stephen S. Ashley Jr.</i>   |  |
| Date   | 06-16-2004   |  |

| CERTIFICATE OF TRANSMISSION/MAILING   |                      |                 |
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| Typed or printed name   | Celeste Foley        |                 |
| Signature   | <i>Celeste Foley</i> | Date 06-16-2004 |

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